

**MOJAVE DESERT AIR QUALITY MANAGEMENT DISTRICT****BRAD POIRIEZ, EXECUTIVE DIRECTOR**

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# Throughput Fuel Dispensing Equipment

Failure to respond by **02/29/2020** will result in enforcement action.**Emission year: 2019**

Fill out sections in gray and return to  
Mojave Desert Air Quality Management District  
at the address listed at the top of this document,  
or email completed form to [cnavas@mdaqmd.ca.gov](mailto:cnavas@mdaqmd.ca.gov)

STATION NAME:	COMPANY NUMBER:	FACILITY NUMBER:	DISTRICT PERMIT NUMBER:
STATION ADDRESS:	CITY:	STATE:	ZIP:
TELEPHONE NUMBER:	EMAIL ADDRESS:		

TYPE OF FUEL DISPENSED:	TOTAL GALLONS DISPENSED IN <b>2019</b> :
<input type="checkbox"/> Gasoline	
<input type="checkbox"/> Diesel fuel	
<input type="checkbox"/> Propane	
<input type="checkbox"/> Aviation gas	
<input type="checkbox"/> Ethanol	
<input type="checkbox"/> Racing fuel	

**CERTIFICATION**

I, \_\_\_\_\_, a responsible official of

NAME OF OFFICIAL

\_\_\_\_\_, hereby certify, based upon information and

NAME OF FACILITY

belief formed after reasonable inquiry, that the above information is true, accurate and

complete. Executed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ at

DAY

MONTH

NAME OF FACILITY

\_\_\_\_\_  
COUNTY AND STATE\_\_\_\_\_  
SIGNATURE\_\_\_\_\_  
NAME AND TITLE**For questions or assistance, call 760.245.1661, ext. 4040**